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ABSTRACT

This final report summarizes the activities of the North Dakota Deaf-Blind Services program, a 3-year project to ensure exemplary programs and services for children and youth with dual sensory impairments (DSI) throughout North Dakota. These goals were met through the systematic identification of individuals with DSI from birth through 21 years and improvement of services to this population. A wide variety of child find and public awareness activities were carried out, including newsletters, interagency meetings, and outreach to Native American communities, resulting in the identification and diagnosis of seven previously undiagnosed children with DSI. Preservice teacher education was provided to student teachers, and presentations on such topics as assessment methods, entry and exit criteria, communication, and organizational structure were made at state schools and residential institutions. Workshops on school-to-work transitions, presymbolic communication strategies, oral motor skills, routines, and other issues were also provided. Families were provided with mentorship, training, and student-specific technical assistance, and brochures and other resources were developed. Appendices include an external evaluation of the project, a needs assessment summary, and copies of project materials. (PB)

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ED 390 243

Services for Children with Deaf-Blindness

CFDA 84.025A, State and Multi-State Projects
Final Performance Report

Project Number: H025A20019

Project Start Date: October 1, 1992

Project End Date: September 30, 1995

Project Title: A grant proposal to provide service throughout North Dakota to children with dual sensory impairments

Project Director: Dr. Brent A. Askvig

Geographic Area Served: North Dakota

Mailing Address: ND Center for Disabilities
Minot State University
500 University Ave. W.
Minot, ND 58707

Project: Technical Assistance, to families, teachers, and related service personnel of children and youth with Dual Sensory Impairment.

Telephone Number: (701) 858-3052

Fax Number: (701) 858-3483

Ages of Children: 0-22

No. of Children: 56

Report written by Brent A. Askvig and Mariel Zeller

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Executive Summary

The North Dakota Deaf-Blind Services (NDDBS) project was a three-year project designed to ensure exemplary programs and services for children and youth with dual sensory impairments (DSI) throughout North Dakota (ND). These priorities were met through the systematic identification of children with DSI and improvement of services for these youngsters. Assistance was provided to families and professionals in a variety of training formats. Topics included effective instruction and support practices, product development, and resource dissemination with families and service providers.

Seven goals provided the framework for the activities of this project and included;

Goal 1 **To fund the services of a project director state liaison,**

Goal 2 **To ensure the continuation of the case finding system for individuals with DSI from birth through the age of twenty-one years,**

Goal 3 **To ensure that children and youth with DSI receiving educational services in ND public schools experience an age-appropriate curriculum with instructional experiences in the least restrictive environment (LRE),**

Goal 4 **To ensure that children and youth with DSI are appropriately transitioned to the adult world of living and work options,**

Goal 5 **To provide resource information to parents of children with DSI that will enhance their understanding of lifelong planning and their ability to access services appropriately,**

Goal 6 **To work with child find and human services personnel in conducting awareness activities and identifying needs of individuals with DSI from birth to five years of age, and**

Goal 7 **To provide programmatic assistance to public school personnel on the provision of integrated educational services for students who have health care needs and DSI.**

The major emphasis of the grant was to build local capacity through training,

mentorship, resource dissemination, and on-site, student-specific technical assistance. Assistance was usually provided to public and private agency personnel. However, support to families and teachers of individuals with DSI was also a priority. A major component of the ND Deaf-Blind Services Project was the Statewide Technical Assistance Team (STAT) which was designed to improve the skills of those working with individuals with DSI and increase the number of individuals with deaf-blind expertise within the State.

Purpose, Goals & Objectives of Project

The intent of this project was to ensure exemplary programs and services for children and youth who have DSI throughout the State of ND. These priorities were met through the systematic identification of children and youth with DSI and the improvement of services for these youngsters. Assistance was provided in a variety of training formats on effective instruction and support practices, product development, and resource dissemination with families and service providers.

Project Overview

The NDDBS Project is a statewide service authorized under Part C, Section 622 of the Individuals with Disabilities Education Act (IDEA). The project was designed in 1989 to fill an identified service gap in the provision of educational services of infants, toddlers, children and youth with DSI. At that time, a full time project coordinator was hired and a part-time project director/Department of Public Instruction (DPI) liaison was appointed. The project coordinator remained the same until the spring of 1994 when she moved on to another position. In the summer of 1994 , a representative for the Department of Public Instruction (DPI) approached Minot State University and requested that Minot State take over grant operation through a sub-contract with NDCD, a University Affiliated Program. As of June 1, 1994, Minot State University hired a project coordinator on a full time basis and appointed a faculty member as a part-time project director, to carry out project activities. In the fall of 1994, a DPI liaison was appointed to ensure a statewide emphasis and assist in the coordination of Project activities and other DPI activities (e.g., state child count, CSPD committee activities, state needs assessment).

Conceptual Framework

Seven goals and sixteen objectives provided the framework for the activities of this project:

Goal 1 To fund the services of a project director state liaison

- Objective 1.1 Maintain the case finding system for individuals with DSI.
- Objective 1.2 Coordinate and monitor all project activities.
- Objective 1.3 Coordinate Statewide Technical Assistance Team (STAT) activities.
- Objective 1.4 Provide technical assistance to all project activities.
- Objective 1.5 Evaluate all project activities.
- Objective 1.6 Plan for and coordinate technical assistance activities with outside agencies (TAC, TRACES, DD Council).

Goal 2 To ensure the continuation of the case finding system for individuals with DSI from birth through the age of twenty-one years

- Objective 2.1 Conduct awareness activities relative to identification and child find. Participate in interagency meetings, review articles, newsletters and programs. Coordinate activities via state professional organizations, state parent, and advocacy organizations and others.
- Objective 2.2 Work with Child Find, LEAs, and Dept. of Public Instruction staff to assist in the identification of students with DSI.
- Objective 2.3 Conduct public awareness activities including inservice training for medical/health care personnel and Early Childhood Services (birth - 2) personnel.
- Objective 2.4 Provide assessment and consultation to newly identified referrals.
- Objective 2.5 Increase awareness and provide inservice on the STAT project. Intended audience: educators, medical/health personnel, direct service providers, consumers, family members, and institutions of higher education.

Goal 3 To ensure that children and youth with DSI receiving educational services in ND public/private schools experience an age-appropriate curriculum with instructional experiences in the least restrictive environment (LRE)

- Objective 3.1 Provide consultation and technical assistance to sites currently serving the educational needs of students with DSI as appropriate to augment the STAT project.
- Objective 3.2 Support community integration, functional curriculum and LRE practices through the STAT Project activities addressing: methods/assessment, entry criteria, exit criteria, document progress, functional curricula, evaluation program, communication, inservice needs, generalization, organizational structure.
- Objective 3.3 Design regional or statewide training for families and direct service

providers on specific techniques and topics relevant to identification and educational programming for individuals with DSI.

Objective 3.4 Collaborate with existing groups, agencies, and schools to provide or sponsor training specific to DSI. These agencies would include the Council for Exceptional Children, Vocational Rehabilitation, ND Community Facilities Association, Developmental Disabilities, and Vocational Education.

Objective 3.5 Work in conjunction with ND Universities to provide information to special and regular education majors on assessment and programming strategies specific to individuals with DSI.

Objective 3.6 Work collaboratively with the Dept. of Public Instruction, Divisions of Elementary/Secondary Education to support their initiatives to provide information to local education leaders on best educational practices.

Objective 3.7 Provide information to paraprofessionals on instructional strategies specific to DSI through existing or development of statewide training program grant sponsored.

Goal 4 To ensure that children and youth with DSI are appropriately transitioned to the adult world of living and work options

Objective 4.1 Provide consultation, technical assistance and training to public schools and staff to improve programming for transition age. Focus on community involvement, quality of life and meaningful employment with proper supports.

Objective 4.2 Continue support to identified students with DSI to develop vocational transitioning while interfacing with adult service agencies

Objective 4.3 Work with the activities initiated through transition grants on interagency cooperation on preparing young adults with DSI to enter programs that serve individuals with and without disabilities.

Objective 4.4 Conduct regional or statewide training specific to transition issues or co-sponsor speakers to existing conferences pertaining to agencies and families which serve transition age students and adults (ND Deaf-Blind Multi-handicapped Task Force).

Objective 4.5 Work collaboratively through MSU's existing training program for community facilities to provide training specific to DSI for direct care providers employed in group homes and adult provider agencies.

Goal 5 To provide resource information to parents of children with DSI that will enhance their understanding of lifelong planning and their ability to access services appropriately

Objective 5.1 Provide updated information to established parent groups which will assist them in program planning.

Objective 5.2 Provide support for and technical assistance to the ND Parents of

Deaf-Blind & Multi-Handicapped Task Force. Enhance awareness of services, use of advocacy and build program planning skills.

Objective 5.3 Disseminate the *Informer* newsletter to all interested parents in ND.

Goal 6 To work with child find and human services personnel in conducting awareness activities and identifying needs of individuals with DSI from birth to five years of age

Objective 6.1 Respond to the needs of program personnel serving children with DSI identified through the Interagency Coordinating Council child find study results.

Objective 6.2 Provide information to physicians, county nurses, social services personnel, and parents as to the identification and programmatic needs of infants who have DSI.

Objective 6.3 Provide brochures and offer awareness training to agencies working with children birth through five years of age.

Objective 6.4 Develop a brochure specific to DSI. Include: identification process, assessment and management strategies.

Goal 7 To provide programmatic assistance to public school personnel on the provision of integrated educational services for students who have health care needs and DSI

Objective 7.1 Respond to the needs of program personnel serving medically involved students who are dual sensory impaired.

Objective 7.2 Meet with existing Task Force on serving students with health care needs, special education teachers, administrators, and parents to determine instructional and information needs.

Objective 7.3 Plan and organize activities to meet the above needs, this may include creating health care guidelines, inservice training, or cosponsoring training.

Project Accomplishments/Outcomes

Since taking over the project in 1994, the new project staff have had difficulty reconstructing project activities from 1992 to June 1994. Thus most project accomplishment and discussion focuses on the time period of June 1994 through September 1995.

A significant impact in both quality and quantity of comprehensive service provision for this population has been demonstrated, and the effectiveness of services for all children and youth with deaf-blindness throughout the state has been enhanced. Specifically, several training activities and services were carried out throughout the project period with families and other related projects on the behalf of children and youth with DSI. These training activities and services were provided in a variety of ways.

Goal 1: To fund the services of a project director state liaison

Objectives and activities under goal 1 describe the role of the Department of Public Instruction (DPI) liaison. The liaison assured that identification of children with DSI was coordinated with the state count, that all project activities were coordinated and monitored, that STAT activities were coordinated with State activities, that all project activities were evaluated, and that the project collaborated with other related projects.

Objective 1.1 Maintain the case finding system for individuals with dual sensory loss. The DPI liaison assisted in coordinating the annual state count with the Project's Census count. She made sure that local education agencies were aware of the census and answered questions as they arose. Project staff identified 56 children and youth as having DSI in ND during the 3rd project year, an increase of 18 since 1992.

Objective 1.2 Coordinate and monitor all project activities. Coordination and

monitoring of project activities was conducted with full participation of the project coordinator, project director, and DPI liaison. These individuals used a strategic planning process to direct project activities. Needs assessment data from teachers, family members, and service providers was collated and analyzed. The project coordinator and director met on a weekly basis to discuss project activities. The project coordinator and DPI liaison met periodically for project management meetings.

Objective 1.3 Coordinate Statewide Technical Assistance Team (STAT) activities. The Department of Public Instruction liaison and project coordinator shared STAT coordination duties throughout the duration of the project. The DPI liaison assured that all requests for technical assistance sent into DPI were forwarded to the project coordinator. The project coordinator, in turn, organized the STAT visits and assured successful completion.

Objective 1.4 Provide technical assistance to all project activities. The DPI liaison served as a state level advisor to project staff. She assured that all project activities were conducted in accordance with the funded proposal. The liaison also assured that project staff followed applicable state and federal special education guidelines and policy (e.g. confidentiality, prior consent).

Objective 1.5 Evaluate all project activities. Evaluations of project activities were designed to address four basic questions:

1. **Has the project had a positive impact on the lives of individuals experiencing deaf blindness?**
2. **Has the project produced the anticipated impact on participating individuals, teachers, related services personnel, family members, agencies and programs?**
3. **Has the project completed its stated goals and objectives within the**

planned time frame?

4. **How satisfied are the participants?**

Several measures were used to review student impact, participant impact, goal and objective attainment, and participant satisfaction. An external evaluation of the ND Deaf-Blind Services Project was conducted in April 1995. The evaluation included a review of progress on project goals and the work with various technical assistance sites. The evaluation report is included in Appendix A.

Objective 1.6 Plan for and coordinate technical assistance activities with outside agencies (HKNC, TAC, TRACES, DD Council). The DPI liaison and project coordinator shared responsibilities for activities under this objective. The liaison linked project staff with relevant technical assistance agencies both within and outside the state. This included obtaining technical support through TRACES (Teaching Research Assistance to Children and Youth Experiencing Sensory Impairments), HKNC-TAC (Helen Keller National Center-Technical Assistance Center), the Perkins School for the Blind, the technical assistance coordinator at the ND school for the Deaf and the ND School for the Blind, the North Dakota Center for Disabilities (NDCD), and IPAT (Interagency Project for Assisted Technology). This coordination resulted in several instate and out of state consultations to project staff and to parents, teachers, and other service providers.

Goal 2: To ensure the continuation of the case finding system for persons with dual sensory impairment from birth through twenty-one years of age.

Activities conducted to ensure completion of this goal included the distribution of project materials (e.g. brochures, resource listings), poster presentations at statewide trainings and both small and large group trainings. Project staff also took part in interagency

meetings and provided technical assistance as requested in the identification of newly referred children and youth. Activities were designed to assure that the case finding system worked and that assistance was provided, as necessary, in the assessment of eligibility to new referrals.

Objective 2.1 Conduct awareness activities relative to identification and child find. Participate in interagency meetings, review articles, newsletters and programs. Coordinate activities via state professional organizations, state parent, and advocacy organizations and others. Collaboration is an essential element of effective human services. It allows for a continuous flow of information and provides a way to access relevant planning and evaluation data. Project staff had many opportunities to provide for this flow of information. The project director is on the ND Interagency Coordinating Council which supports ND Child Find, and the State Transition Planning Council. The project director was a board member of ND Council for Exceptional Children (NDCEC). The project coordinator provided brochures and project resources for staff at the ND Pathfinder Parent Center for distribution to parents. She also met with the Native American Family Systems Network to explain services and offer project assistance.

Objective 2.2 Work with Child Find, LEAs, and Dept. of Public Instruction staff to assist in the identification of students with DSI. The project mission, activities, program information, and technical assistance were made available in a variety of ways. In order to provide an accurate count of children who have DSI, project staff developed and provided a census brochure and identification checklist to 30 LEAs and further information and consultation was provided as requested.

Objective 2.3 Conduct public awareness activities including inservice training for medical/health care personnel and Early Childhood Services (birth - 2) personnel. A variety of formats were used to provide information and training to personnel who would come into contact with a child (birth to 2) with DSI. Project identification resources were distributed to the five Early Childhood Tracking Coordinators and the eight Infant Development Program Coordinators. The Program Coordinator visited with staff from Infant Development Programs on services available through the project and a poster presentation was displayed at the ND Council for Exceptional Children (NDCEC) Annual Conference in February, 1995 and at the ND Fall Transition Institute in September of 1995. Project resources were available at the presentation.

Objective 2.4 Provide assessment and consultation to newly identified referrals. The project coordinator was contacted by special education units in the 1994-95 school year concerning possible referrals to the ND Deaf-Blind Census. The project coordinator spent time assessing the eligibility of the students referred by the units. Of the 11 children referred, seven children were found to have DSI and added to the registry.

Objective 2.5 Increase awareness and provide inservice on the STAT project. Intended audience: educators, medical/health personnel, direct service providers, consumers, family members, and institutions of higher education. Attempts were made to provide information on the STAT project to a wide variety of audiences. Teachers-in-training were provided information through guest lectures in special education classes and through student practicum inservice on the project and its activities. Three presentations were provided by the project coordinator which impacted 88 preservice teachers. Presentations were also

provided to educators at state schools, residential facilities, and LEAs on the project mission, activities, and technical assistance available through the project. Twelve presentations took place impacting approximately 63 people.

Goal 3: To ensure that children and youth with DSI who receive an education in ND public/private schools receive an age-appropriate functional community-based curriculum and instructional experiences in the least restrictive environment (LRE).

Training workshops, on-site student specific training, and consultation were sponsored and coordinated by the project to ensure that personnel working with children and youth from 0-22 with DSI had access to exemplary practices. These activities were provided in a variety of forms including on-site, student-specific training, small group instruction, and state wide group instruction. These activities were targeted for families and personnel working with children and youth with DSI.

Objective 3.1 Provide consultation and technical assistance to sites currently serving the educational needs of students with DSI as appropriate to augment the STAT project. Consultation and technical assistance was provided to sites serving the educational needs of students with DSI as requested. On-site, technical assistance was provided to the teams of 6 children and youth with DSI. Project staff and STAT members provided the consultation when appropriate. The following table shows the dates, topics covered, consultant, and location of the consultations.

Date	Topic	Consultant	Location
September, 1994	Pre-symbolic Communication Strategies	Jim Durkel	Dickinson
September, 1994	Pre-symbolic Communication Strategies	Jim Durkel	Dickinson
February, 1995	Object Communication and Choice-making	Project Coordinator	Minot
April, 1995	Program Evaluation	John Filler	Grand Forks
May, 1995	Routines	STAT members	Jamestown
August, 1995	Oral Motor	STAT members	Jamestown

Table 1 Team Consultation

Objective 3.2 Support community integration, functional curriculum and LRE practices through the STAT project activities addressing: methods/assessment, entry criteria, exit criteria, document progress, functional curricula, evaluation program, communication, inservice needs, generalization, and organizational structure. To ensure that project activities were addressing best practices and meeting state needs, STAT training activities were designed with information from a needs assessment that was conducted in September of 1994 and from interviews with professionals and parents of children with DSI in ND. Training activities and workshops addressed the needs of the State and reflected best practice. All 16 trainings and workshops were sponsored by the project and impacted 158 people.

Objective 3.3 Design regional or statewide training for families and direct service providers on specific techniques and topics relevant to identification and educational programming for individuals with DSI. All trainings were designed to meet the needs of families and direct service providers. In all, 16 training opportunities occurred and impacted over 158 people. For more information on topics and locations of the training, refer to the Project Impact section of this report.

Objective 3.4 Collaborate with existing groups, agencies, and schools to provide or sponsor training specific to DSI. These agencies would include the Council for Exceptional Children, Vocational Rehabilitation, ND Community Facilities Association, Developmental Disabilities, and Vocational Education. Every attempt was made to collaboratively work with existing agencies, groups, and schools to provide or sponsor training specific to DSI. Opportunities included presenting with other people, co-sponsoring training workshops, and presenting poster presentations at larger conferences. Specifically, the project coordinator

and a vision consultant from Souris Valley Special Services presented at the NDCEC in February, 1995. Sixteen people attended the session which covered characteristics of students with DSI and effective training strategies.

Project staff co-sponsored two training workshops with other groups. The first, a workshop entitled "Transition Issues for Students who have DSI: Multiple Perspectives, Multiple Approaches" was held on April 28 and 29, 1995 and was co-sponsored by Helen Keller National Center-Technical Assistance Center (HKNC-TAC), the ND School for the Deaf (NDSD) and the NDDBS project. The workshop focused on developing an awareness of the process and skills needed to help individuals with DSI make the transition from schools to adult programs. The second, a national satellite videoconference entitled, "Creating A World of Opportunities: Liberating People with Disabilities through Adaptive Technologies" was held on May 18, 1995 and was hosted by the ND Interagency Project on Assistive Technology (IPAT), the NDDBS project, and the NDCD. Finally, poster presentations were made in conjunction with other statewide training to distribute project information to a wider audience. The first was at the NDCEC Conference in February, 1995 and the second was at the ND Fall Transition Institute in September, 1995.

Objective 3.5 Work in conjunction with ND universities to provide information to special and regular education majors on assessment and programming strategies specific to individuals with DSI. Several higher education training activities were conducted in 1994. They were designed to acquaint preservice trainee's with introductory information on DSI. Table 2 shows the dates, topics covered, and number of students who attended the trainings.

Date	Course	Topic	Attending
June, 1994	Intro to SPED	The ND Deaf Blind Service Project	21
June-Aug., 1994	Senior Practicum	Inservice Training	2
Oct., 1994	Intro to SPED	Characteristics of DB & Intervention Strategies	65

Table 2 Higher Education Training

Objective 3.6 Work collaboratively with the DPI, Divisions of Elementary/Secondary Education to support their initiatives to provide information to local education leaders on best educational practices. All project training and workshops were planned with the assistance of the DPI liaison to assure that educational standards for best practices were met.

Objective 3.7 Provide information to paraprofessionals on instructional strategies specific to DSI through existing or development of statewide training program grant sponsored. Information was provided by collaborating with existing agencies and providing on-site technical assistance. Prior to June 1, 1994, the project coordinator worked with the staff from the existing Paraeducator Program located at MSU to develop a module consisting of information specific to DSI. On-site training occurred on three separate occasions and impacted 15 paraprofessionals.

Goal 4: To ensure that children and youth with DSI are appropriately transitioned to the adult world of living and work option.

Training workshops, on-site student-specific training, and consultation specific to transition were sponsored and coordinated by the project to ensure the appropriate transition of students with DSI. Project staff worked with existing agencies to provide for an efficient use of resources.

Objective 4.1 Provide consultation, technical assistance, and training to public

schools and staff to improve programming for transition age. Focus on community involvement, quality of life, and meaningful employment with proper supports. Project staff worked with staff of the NDSD and the HKNC-TAC to put on a workshop dealing with transition issues. The workshop entitled "Transition Issues for Students who have DSI: Multiple Perspectives, Multiple Approaches" was held on April 28 and 29, 1995. Thirty-two people participated in the workshop that focused on developing an awareness of the process and skills needed to help individuals with DSI make the transition from schools to adult life. Also, project staff along with HKNC-TAC provided consultation to a program planning team on the development of a transition plan for a student with DSI.

Objective 4.2 Continue support to identified students with DSI to develop vocational transitioning while interfacing with adult service agencies. Project staff and a representative from HKNC-TAC met with a student's program planning team in January, 1995. The meeting was held to address student specific transition needs. A plan was developed and assistance was supplied by project staff as necessary.

Objective 4.3 Work with activities initiated through transition grants on interagency cooperation on preparing young adults with DSI to enter programs that serve individuals with and without disabilities. Project staff disseminated project specific information through a poster presentation at the ND Fall Transition Institute in September, 1995. "Informer" newsletters, project brochures, and resource listings from the ND Deaf-Blind Resource Library were provided.

Objective 4.4 Conduct regional or statewide training specific to transition issues or co-sponsor speakers to existing conferences pertaining to agencies and families which serve

transition age students and adults (ND Deaf-Blind Multi-handicapped Task Force). In order to meet the needs of students of transition age with DSI, project staff collaborated with existing agencies to conduct a workshop on transition issues. The workshop entitled "Transition Issues for Students who have DSI: Multiple Perspectives, Multiple Approaches" was held on April 28 and 29, 1995 and was co-sponsored by HKNC-TAC, NDSD, and the NDDBS project. The workshop focused on developing an awareness of the process and skills needed to help individuals with DSI make the transition from schools to adult life.

Objective 4.5 Work collaboratively through MSU's existing training program for community facilities to provide training specific to DSI for direct care providers employed in group homes and adult provider agencies. Prior to April, 1994, the project coordinator provided information on DSI to the existing paraprofessionals training program located at MSU. The information was to be incorporated into training modules for direct care service providers.

Goal 5: To provide resource information to parents of children and youth with DSI that will enhance their understanding of life long planning and their ability to access services appropriately.

Resource information and assistance was provided to the parents and families of children with DSI in a variety of ways. Project staff participated in activities with parent groups, took part in task force meetings, provided assistance in program planning, and disseminated resources and materials through the ND Deaf-Blind Resource Library and the distribution of the project newsletter.

Objective 5.1 Provide updated information to established parent groups which will assist them in program planning.

Updated information was distributed to parent groups and families in a variety of ways. Project staff met and worked with parent groups and provided assistance in program planning. Prior to April, 1994, the project coordinator worked with the Family Education Enhancement Teams (FEET) in each LEA. FEET is sponsored by LEA and DPI to assure parent-professional partnerships in special education. The project coordinator also attended a meeting of the Native American Family Systems Network to provide information on the project and services. Project staff also attended two IFSP/IEP transition meetings, a transition team meeting, an IHP meeting, and an IEP meeting all at parent requests.

Objective 5.2 Provide support for and technical assistance to the ND Parents of Deaf-Blind & Multi-Handicapped Task Force. Enhance awareness of services, use of advocacy skills and build program planning skills. The Multi-Handicapped task force, a group of professionals and parents of children with multiple disabilities, met in Carrington on October 6, 1994. The Task Force was disbanded because it was agreed that the Task Force had served its purpose. Project staff have also been involved with the Usher Task Force, a group a parents and professionals from the ND School for the Deaf. The project coordinator attended a meeting held on April 28, 1995 at The ND School for the Deaf (NDSD).

Objective 5.3 Disseminate the *Informer* newsletter to all interested parents in ND. The project newsletter, the "Informer" was disseminated to 33 parents and families of children with DSI in ND. Parents and families are also able to access loan materials through the ND Deaf-Blind resource library.

Goal 6: Work with child find and Human Services personnel in conducting awareness activities and identification of unmet needs of individuals with DSI from 0-5 years of age.

Families of children with suspected hearing and vision loss interact with a number of public services agencies. Staff at these agencies should be familiar with the indicators of DSI. In addition, they should be aware of potential services, resources, and training options for these children. To assure that the staff would have the appropriate information, project staff developed brochures on the indicators of DSI and services available. These brochures were distributed to the appropriate agencies.

Objective 6.1 Respond to the needs of program personnel serving children with deaf-blindness identified through the Interagency Coordinating Council (ICC) child find study results. The project director of the ICC provided data on deaf-blindness to the Child Find Subcommittee of the ICC. Those data were incorporated into the Child Find tracking and monitoring databases developed by the ND Early Childhood Tracking System.

Objective 6.2 Provide information to physicians, county nurses, social services personnel, and parents as to the identification and programmatic needs of infants who have DSI. Project staff addressed the needs of social service personnel (Infant Development Program Coordinators) and families in both identification and programming needs. Project brochures, deaf-blindness brochures and identification checklists were developed and distributed to the eight Infant Development Program Coordinators for the purpose of identification. Information on the services and resources available through the project was also provided.

The project newsletter, the "Informer" is disseminated to Infant Development Program coordinators, parents, and families of children with DSI in ND. These same individuals are able to access loan materials through the ND Deaf-Blind Resource Library.

Dissemination data are shown in the Project Impact section. Project staff also attended two IFSP team meetings and assisted in a program review at a family's request.

Objective 6.3 Provide brochures and offer awareness to agencies working with children birth through five years of age. Project brochures, deaf-blind census brochures, and identification checklists were developed and distributed to Early Childhood Tracking coordinators, and preschool teachers of students with DSI for the purpose of identification.

Objective 6.4 Develop a brochure specific to deaf-blindness. Include: identification process, assessment and management strategies. To assure that children with DSI are accurately identified and receiving appropriate services, project staff developed two brochures and an identification checklist. The first brochure describes services available through the project, how to access services, and who can get services. The second brochure describes the identification process and answers commonly asked questions concerning children and youth with DSI. Finally, the census checklist is meant to accompany the census and assist in the identification of children and youth with DSI. To review the brochures and checklist, please refer to Appendix C.

Goal 7: Provide programmatic assistance to public school programs on the provision of integrated educational services for students who are medically involved and have DSI.

Project staff provided assistance in training and technical support in an effort to provide effective services for children who are medically fragile and have DSI. Project staff participated in a state task force, helped develop guidelines, and provided technical assistance as requested. Technical assistance activities resulted in the development of guidelines for serving students with health care needs.

Objective 7.1 Respond to the needs of program personnel serving medically involved students who are deaf-blind. Technical assistance with school and group home staff for a student with special health care needs took place over a 7-month time span. The technical assistance provided was to assist the development of consistent programming between the school and residential group home for a child who was medically fragile with DSI. The technical assistance involved observation of both programs and meetings with school and group home staff to review programming and inconsistencies. Three inservice trainings occurred with group home staff impacting over 15 people. The technical assistance resulted in the development of an object communication system that was used at school and at home resulting in increased choice-making opportunities for the child at home and school.

Objective 7.2 Meet with existing Task Force on serving students with health care needs, special education teachers, administrators, and parents to determine instructional and information needs. The Program Coordinator was a leader in the development of guidelines for serving medically fragile and other health impaired children in public schools. She coordinated the Special Health Care Needs Task Force from 1992 through April, 1994. Guidelines for serving students with health care needs was completed in June of 1994. The DPI provided the manual to public school teachers and administrators. The document is available from the ND Dept. of Public Instruction, Bismarck, ND.

Objective 7.3 Plan and organize activities to meet the above needs, this may include creating health care guidelines, inservice training, or cosponsoring training. The guidelines were developed and the manual was published and disseminated by the ND DPI. DPI will conduct training in the future.

Project Changes

Two major changes from the initial project goals were made in the project. Both changes occurred when the project staff left. In April, 1994, the project coordinator left the NDDBS project to take another job. At about the same time, the DPI liaison moved to another state. The special education division director at DPI then contacted the NDCD at MSU regarding continuation of the project. DPI subcontracted NDCD to hire staff and operate the project from May, 1994 through September, 1995.

The second change occurred when NDCD staff took over program operations. The staff determined that the project's resources should more appropriately be focused toward child and family impact. Thus, the STAT and project coordinator activities were shifted toward more small group consultation and technical assistance. At that point, each consultation or technical assistance event revolved around a child and family issue, with an emphasis on making specific child change.

Project Impact

Project staff gathered evidence to assure that project activities impacted children with DSI, service providers and parents. The following tables show the compilation of data to support the effectiveness of project activities. Table 3 shows dissemination data as a result of the Deaf-Blind Library and distribution of the "Informer" newsletter.

ND Deaf-Blind Resource Library	
Videotapes	49
Text	6
Total Loaned	*55*
Informer Newsletter	
Fall, 1994	506
Winter, 1995	628
Spring, 1995	628
Total Mailed	*1762*

Table 3 Library and Newsletter Dissemination

Tables 4 and 5 present data on the various training activities of the project.

Training Session	Month	Location	Participants
Developing appropriate ed. programs for students with DSI	September	Mandan, ND	51
Assessment tools/strategies for children and youth with DSI	December	Jamestown, ND	17
How to incorporate choice-making throughout the day	February	Minot, ND	9
Educational Strategies for Students with DSI	February	Fargo, ND	16
Collaborative Early Intervention Teaming for Rural Areas	April	Grand Forks, ND	11
Transition Issues for Students who have DSI: Multiple perspectives, multiple approaches	April	Devils Lake, ND	32
Creating a world of opportunities: Liberating people w/Dis through adaptive technologies	May	Minot, ND	11

Table 4 Large Group Trainings

Training Session	Month	Location	Participants
Calendar Systems and their Use	January	Minot, ND	3
Choice-making and communication	March	Minot, ND	3
The use of calendar systems and routines	April	Dickinson, ND	3
STAT training in conjunction with an on-site consultation	May	Jamestown, ND	3
Transition Options	February	Minneapolis, MN	3
STAT Training in Conjunction with WS	April	Devils Lake, ND	3
Van Dijk Training	July	Washington, DC	2
Behavior State Training	July	Minot, ND	1
Usher Syndrome Training	September	Pittsburgh, PA	2

Table 5 Small Group Training Opportunities

Table 6 presents data on the poster presentations that were made by project staff.

Date	Location	Conference
February, 1995	Fargo, ND	NDCEC
September, 1995	Bismarck, ND	ND Fall Transition Institute

Table 6 Poster Presentation

Table 7 indicates the number of contacts made concerning consultation, information/referral services and pre-service professional training.

Consultation	Professionals	236
	Paraprofessionals	17
	Family Members	36
	Service Impact	*289*
Information/ Referral Services	Professionals	1192
	Paraprofessionals	4
	Family Members	15
	Service Impact	*1211*
Pre-Service Professional Training	Professionals	89
	Paraprofessionals	0
	Family Members	0
	Service Impact	*89*

Table 7 Technical Assistance Impact

Products

A project brochure entitled, "North Dakota's Deaf-Blind Services Project" and a census brochure entitled, "North Dakota Deaf-Blind Services Project Census: Your passport to technical assistance for children who have both an auditory and a visual impairment" were developed and disseminated in year three at presentations and workshops. They were also mailed to ND special education directors, special education coordinators, infant development coordinators, early childhood trackers, vision consultants, STAT & Advisory Board members and special education teachers throughout the State.

The project's resource library's video and text listings were updated and distributed at poster presentations and workshops. Updated copies were mailed to STAT and Advisory members and were mailed out upon request. Examples of some project products are shown in Appendix C.

Additional Information

Further information about the services and products provided by this project can be obtained from:

Mariel Zeller
project coordinator
ND Deaf-Blind Services Project
MSU - NDCD
500 University Ave. West
Minot, ND 58707

Assurance of ERIC Publication

This final report has been forwarded to the appropriate ERIC Clearinghouse for dissemination through the ERIC network.

Appendix A

External Evaluation of ND Deaf Blind Services Projects Years 1 and 2

Completed, April 1995
by
Dr. Donna Wickham
University of Kansas

Project Evaluation Findings

The following findings and implications are based upon discussion with project staff, familiarity with project goals, objectives and activities, and progress to date. During Years 1 & 2, project activities were coordinated through the ND Dept. of Public Instruction with a subcontract to Burleigh County for coordination of project activities. Beginning in Year 3, project activities were subcontracted to the ND Center for Disabilities at MSU to have direct responsibilities for administration and coordination of project activities. This report reflects the activities that were initiated in Years 1 and 2 and completed in Year 3.

Direct Services

In ND, direct services may be provided to infants and toddlers (birth - two)(. Services for children three and older are mandated in the State. During Year 34, project staff worked with the Infant Developmental Services to plan for training activities with the regional infant development coordinators. Potential topics for training were identified on a needs assessment conducted in Year 3 and will be pursued in the new Project. Previously, one coordinator was a member of the STAT team.

Training Activities

Most training efforts during Years 1 and 2 have been spent in improving the skills of a select number of professionals within the State (STAT team). While the content has been good, two problems are noted: 1) many of the STAT team members are not in direct service positions and therefore, direct services to individuals with deaf-blindness have not improved dramatically, and 2) there was no systematic plan by the DSI project to utilize the skills of the STAT teams around the state with the many direct service providers. During Year 3, a plan was proposed to use the skills of the STAT team. In addition, changes to the

make-up of the team have been revised to reflect geographic and professional diversity.

Training content has focused primarily on instructional practices specifically for individuals with deaf/blindness without the context of general education or the community. Little attention has been placed on integrating these effective practices with good teaching practices found in general education. Additionally, little focus has been placed on exemplary practices in the field of general or special education, especially inclusion, nonsymbolic communication, collaborative problem solving and positive behavior supports.

Training efforts has traditionally been directed to service providers solely. Family activities have been more supportive in nature, e.g., family support networks. Joint family and service provider training opportunities need to occur that allow each stakeholder group to have similar information bases. Additionally, these joint trainings allow teams to form around the individual with deaf-blindness emphasizing that the individual is the "whole person."

Project Operations

During year 3, clear mission and plan of action were evident. These efforts should continue to be re-evaluated and revised based upon exemplary practice and information from the key stakeholders. Other findings include:

The tracking system has historically been confusing and confounded with family confidentiality issues. The purpose and intent of the deaf/blind census needs to be more available too LEA's and families to allow for a more accurate count.

Awareness of the project intent and availability is limited. Many of the recipients were unclear as to the types of activities of the project and the intent of the funds.

Beginning in Year 3, operation of the project occurred through the NDCD. This

association added many physical and personnel resources to the project at no cost including access to databases, current research, and state-of-the-art technology.

Collaboration Efforts

Collaboration with agencies and councils has occurred during all years of the grant. During Year 3, DSI staff collaborated extensively with the Infant Developmental Services, Transition services, and paraeducators to establish close working relationships so that deaf/blind issues and interests are represented in their efforts. Project staff have served on a number of state councils to provide direction and information for issues of interest for children and youth with DSI.

Dissemination Activities

A project brochure is developed and disseminated by the project. As well, an extensive, up-to-date library is available at Burleigh County for project recipients. These materials are disseminated at no cost by request. While the accessibility and breadth of content is excellent, the availability to project staff is poor. This needs to change beginning in the new project. Additionally, plans to disseminate project information to a wider variety of potential recipients of training were developed in Year 3 of the project.

Products Developed through Project Activities

Products developed through the project include a project brochure and informational brochure about the census. Additional, a tri-annual newsletter is published by the project. This has occurred during all project years.

Project Recommendations

The changes that occurred in Year 3 offer much hope for improved and cohesive

training. Recommendations focus primarily on expanded and purposeful training. Many of the plans developed in Year 3 provide a promising start to improve services and training to individuals with DSI in ND. The following are further recommendations to improve the quality of life for these individuals.

1. This project's presence and mission needs to be distributed in a multi-faceted approach including project brochure, presentations made by project staff (as well as technical assistance recipients) to families, medical personnel, social service agencies, schools, early intervention agencies, and universities in personnel preparation programs.

2. The format of training activities should be varied for the multi-faceted needs of families and service providers. The varied levels of expertise and rural nature of the state call for continued awareness and skill building activities as well as intensive and systematic implementation training.

3. Investigate parent-to-parent models for families of newly certified children. Families of children newly identified often have many questions and concerns that may best be addressed by "veteran" parents who have experiences with services and expectations. This project should devote efforts to matching these families and supporting these parent-to-parent matches.

4. Focus training activities on exemplary practices in general and special education, especially inclusion, cooperative learning, integrated curriculum, collaborative problem solving, thoughtful education/multiple intelligences.

5. Continue to utilize the STAT team as consultants throughout the state. At the same time, focus training efforts to improve their ability to act as effective consultant to direct service providers.

6. Conduct all training activities that include families and service providers jointly. While teaching them content also embed training activities so that they can practice teaming and joint problem solving.

7. Training efforts should be directed to collaboration problem-solving. This is a population that truly challenges the skills of even the best prepared personnel. Teaching a team of people who are invested in the individual and their quality of life and future is critical.

8. Investigate technology and other media to expand the scope of training. Technical assistance should be expanded beyond on-site visits, telephone, and mailed information. See U, See Me offers the potential to conduct consultation in real-time and promote collaborative training. MSU has state-of-the-art distance broadcast

capabilities that may assist training as well. Technology is an especially viable format given the remoteness of the state and the location of the individuals throughout the state.

Appendix B
ND Deaf-Blind Services Project
Needs Assessment Summary
Summer, 1995

Needs Assessment Findings

Results of Needs Assessment - Summer, 1995.

Project staff surveyed family's service providers and early interventionists. The surveys went to people providing services to the 56 children on the deaf-blind registry. The surveys were used as a guide for targeting the technical assistance activities for year three.

A return rate of 50% was noted from service providers and early interventionists and 38% from families.

The priority needs identified through the surveys were:

Service Provider Needs	Early Intervention Needs	Family Needs
*assistive technology *communication skills and *environmental assessment *functional vision programming, inclusion, functional curriculum/ community based instruction (CBI), and functional hearing programming	*developmentally appropriate programming *assistive technology *functional vision screening *functional vision programming *functional hearing programming	*increasing communication skills *activities to increase participation in school *activities to increase participation in the community

Appendix C

ND Deaf-Blind Services Project

Project Materials

Additional Information

To request services, contact:
Mariel Zeller, Coordinator
North Dakota Deaf-Blind Services Project
Minot State University
North Dakota Center for Disabilities
500 University Avenue West
Minot, North Dakota 58707
Phone: (701) 858-3580
Fax: (701) 858-3483
Toll Free 1-800-233-1737
E Mail: zeller@warp6.cs.misu.nodak.edu

The North Dakota Deaf-Blind Services Project is administered through the North Dakota Center for Disabilities at Minot State University.

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Minot State University
North Dakota Center for Disabilities
North Dakota Deaf-Blind Services Project
Mariel Zeller, Coordinator
500 University Avenue West
Minot, North Dakota 58707

North Dakota's Deaf-Blind Services Project

North Dakota
Center for Disabilities
Minot State University
500 University Avenue West
Minot, North Dakota 58707

What is North Dakota's Deaf-Blind Services Project?

The North Dakota Deaf-Blind Services Project is a statewide service authorized under Section 622 of the Individuals with Disabilities Education Act (IDEA). The project was designed in 1989 to fill an identified service gap in the provision of educational services to infants, toddlers, children and youth with deaf-blindness. The primary goal of the project is to build local capacity through training, mentorship, resource dissemination and on-site, student specific technical assistance. Assistance is provided to public and private agencies, however, support to families and teachers of individuals with deaf-blindness is a priority.

Who is Eligible?

Individuals with dual sensory impairments are a heterogeneous group and include:

- individuals whose hearing and vision evaluation meet legal requirements deafness and blindness;
- individuals who have hearing and vision impairments of mild to severe degree and additional learning and/or language disabilities;
- individuals who have been diagnosed as having a degenerate disease which will affect vision and/or hearing acuity, and;
- individuals with multiple disabilities due to central nervous system dysfunction who may demonstrate inconclusive responses during evaluation or in natural environments.

What are some of the activities of the North Dakota Deaf-Blind Services Project?

- The implementation of annual child count procedures.
- The provision of technical assistance via on-site visits and telephone consulation.
- Workshops.
- Maintenance of the North Dakota Deaf-Blind Resource Center with over 700 items including books, curricula and assessment materials, video tapes, newsletters.
- Mentor teacher training and specific follow-along activities.
- Dissemination of project information via the *Informer* newsletter published three times per school year.

What topics are addressed through the training and technical assistance activities?

- Curriculum development
- Educational assessment
- IEP development
- Family networks
- Communication development
- Inclusion
- Community-based instruction
- Vocational instruction
- Community living
- Recreation
- Positioning and handling
- Orientation and mobility

Who can use these services?

- Families
- Educational personnel who work with individuals birth through 21 years of age with dual sensory impairments.
- Service providers from state and community agencies, medical programs, and others who provide services to individuals with dual sensory impairments.

For Service

The North Dakota Deaf-Blind Services Project can provide assistance to service providers and parents on behalf of children and youth who are deaf-blind. Free services include: inservice training, consultations, and information dissemination for both service providers and families.

Please feel free to call or write us when you need these services!

Mariel Zeller, Project Coordinator
ND Deaf-Blind Services Project
Minot State University
NDCD
500 University Ave. West
Minot, ND 58707
1-800-233-1737
(701) 858-3230

Typical Questions

Q. What is the Deaf-Blind census?

A. The Deaf Blind Census is a special count of all ND children ages birth through 21 who have both hearing and vision loss.

Q. Why is the Census conducted?

A. The Census provides the federal government with a count of the children who may require specialized services in the area of dual sensory impairments. The ND Deaf-Blind Project uses these data to determine the need for technical assistance services for parents and service providers.

Q. What are these services and how do we get them?

A. Project staff can help with information, materials, videos, workshops, inservice training and other necessary technical assistance. Call the project coordinator at 1-800-233-1737 for more information.

Q. I have a student who is multi-handicapped. Can she be classified as Deaf-Blind?

A. If the student meets the definition of deaf blind, OR functions as if she/he is deaf-blind, then we can add her/him to the Census list. Also, you can then access technical assistance services through the Project.

Q. When should we enter our children with deaf-blindness on the Census list?

A. You can enter these children at any time. Project staff will also do a statewide deaf-blind child count each winter.

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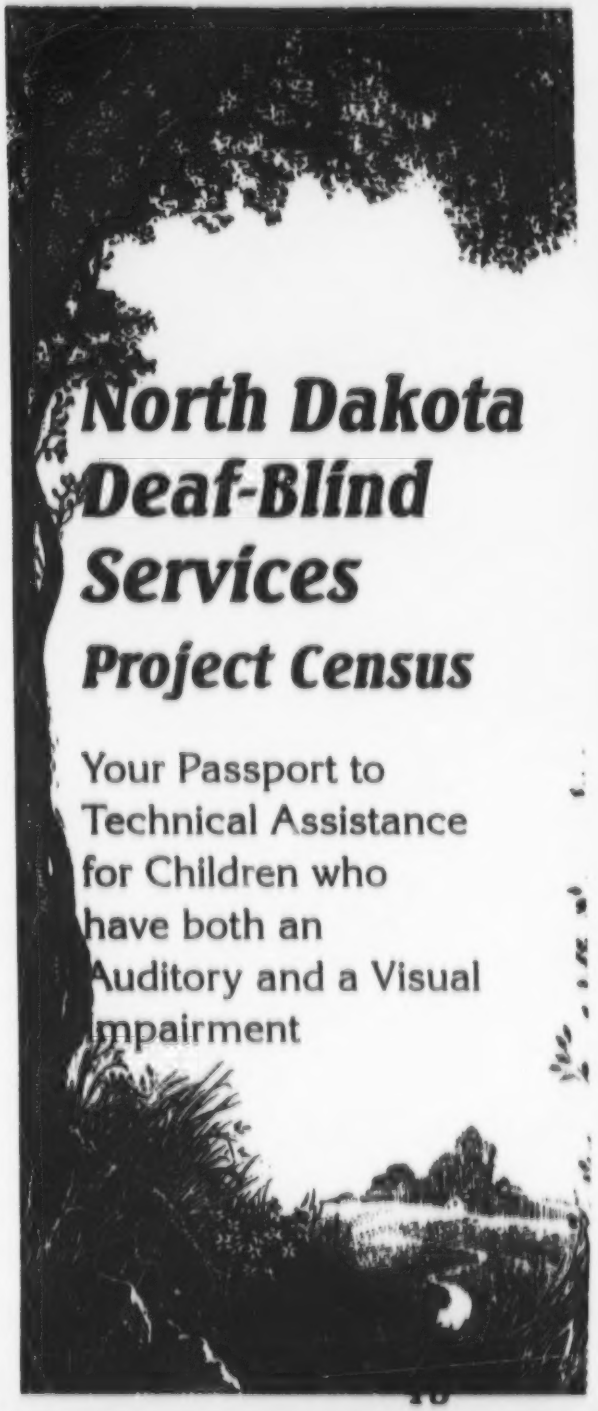


North Dakota Deaf-Blind Services

Project Census

Your Passport to Technical Assistance for Children who have both an Auditory and a Visual Impairment

Who Qualifies?

Children & youth who

◆ are both deaf and blind as demonstrated by accurate vision and hearing tests.

◆ have hearing and visual impairments of a mild to severe degree and additional disabilities.

◆ may have been diagnosed as having a degenerative condition which will affect vision and/or hearing acuity.

◆ have multiple handicaps due to central processing dysfunction who may demonstrate inconclusive vision and/or hearing responses during evaluations or in the natural environment.

Sensory impairments can be the result of:

◆ Pathology in the auditory/visual system (e.g., Rubella, Usher's Syndrome).

◆ Central Nervous System damage.

◆ Accidents

◆ Illness

◆ Injuries

(Other handicapping conditions may also be present.)

When to File?

For your convenience, we have developed a system that will allow you to provide notification if any changes occur in your population of children who are deaf-blind. Enclosed are several copies of the census notification form.

Please fill out this form and return it to the North Dakota Deaf-Blind Services Project whenever a child who is deaf-blind:

◆ is identified in your school or agency;

◆ moves;

◆ reaches the age of 21; or

◆ needs to be deleted from the registry for any reason

Confidentiality

The North Dakota Deaf-Blind Services Project is required under federal regulation (section 622 of the Education of the Handicapped Act, as amended) to identify children and youth who are deaf-blind in North Dakota.

In anticipation of your concern whether disclosure of the information requested without parental consent would violate FERPA, please by assured that the information requested is for the purposes outlined in Reg.99.31 (ca) (6) and shall by utilized and disposed of as provided therein.

Reg. 99.31 (Prior Consent for Disclosure NOT Required) provides as follows:

(a) An educational agency or institution may disclose personally identifiable information from education records of a student without the written consent of the parent of the student or the eligible student if the disclosure is:

(b) To organizations conducting studies for, or on behalf of, educational agencies or institutions for the purpose of developing, validating, or administering predictive tests, administering student aid programs, and improving instruction, ...[T]he terms [sic] "organizations" concludes, but is not limited to, Federal, State, and local agencies, and independent organizations...

STUDENT'S NAME

Dual Sensory Impairment Checklist

To meet the condition of dual sensory impaired and to receive technical assistance from The North Dakota Deaf-Blind Services Project, a child (birth through 21) must meet at least one of the following conditions in both vision and hearing categories and be eligible for special services.

HEARING

1 ☐ Documented history of chronic otitis media especially during the first 6 years of life, that appears to impact their hearing ability

or

2 ☐ Documented hearing impairments (conductive, sensorineural, or mixed), of at least 25 db in at least one ear *

or

3 ☐ Documented syndrome/disorder associated with hearing loss or progressive hearing loss *

or

4 ☐ Diagnosis of auditory processing disorder following testing by a speech-language pathologist, audiologist, and/or psychologist such as *

or

5 ☐ Caregivers/professionals who know the child suspect impaired hearing based on:

a) significant and otherwise unanticipated delay in receptive and/or expressive speech-language skills

or

b) inconsistent responses to auditory stimuli in the natural environment

VISION

1 ☐ Documented syndrome/disorder (including genetic) associated with loss of vision *

or

2 ☐ Documented syndrome/disorder associated with progressive or fluctuating vision loss *

or

3 ☐ Diagnosis of cortical visual impairment from ophthalmologist and/or neurologist *

or

4 ☐ *Diagnosis of nystagmus *

or

5 ☐ Diagnosis of amblyopia after the age of 6 yrs *

or

6 ☐ History of untreated eye condition, such as cataracts, any time during the first 3 years of life *

or

7 ☐ Documented visual impairment of 20/70 or worse after correction in better eye or a loss in visual field

or

8 ☐ Caregivers/professionals who know the child suspect visual impairments based on:

a) visual attending and/or visual examining behaviors are less than anticipated

or

b) impaired visual-motor functioning, resulting from strabismus or cerebral palsy *

9 ☐ Visual perception problem *

*examples/definitions on reverse side of this page

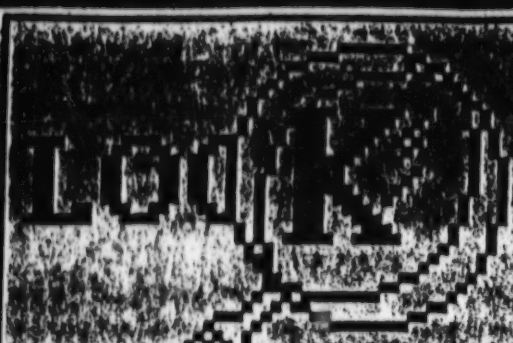
Adapted From Texas Deaf-Blind Project

EXAMPLES

Hearing	Vision
2) *A conductive hearing loss is caused by problems in the outer ear or middle ear (e.g., blockage of the ear canal, damage to the ear drum, problems with the bones in the middle ear, fluid in the middle ear.) A sensorineural hearing loss is caused by nerve damage to the inner ear. A mixed hearing loss is a combination of conductive and sensorineural impairments. 3) *Some examples of syndromes associated with progressive hearing loss include: - Norrie Syndrome - Sticklers Syndrome - Kniest Syndrome - Goldinhar Syndrome - Mohr Syndrome - Paget Syndrome - Cockayne Syndrome - Hurler Syndrome 4) *Reports from professionals that may include such terms or descriptions as: - central auditory processing problem - central auditory processing dysfunction - difficulty in understanding what is heard	1) *Some examples of syndromes or disorders associated with loss of vision include: - Congenital cataracts - Retinopathy of Prematurity - Retinal Blastomas - Noonan Syndrome - Morquio Syndrome - Marfan Syndrome 2) *Some examples of disorders associated with progressive or fluctuating vision loss include: - Retinitis pigmentosa - Usher Syndrome - Glaucoma 3) *Cortical visual impairment results in the inability of an individual to process visual information. 4) *Nystagmus is an involuntary, rapid movement of the eye. 5) *Amblyopia is uncorrectable blurred vision due to disuse of the eye. 6) *Cataracts are a clouding of the lens of the eye. 8b) *Strabismus is a deviation of the eyes so they are not simultaneously directed to the same object. 9) *Examples of visual perception problems: - Child may be observed to overreach or underreach for objects - Child may misjudge where the food is on a plate - Child may be confused by color or texture of walking surface

If you have any questions concerning this checklist, contact:

Mariel Zeller
ND Deaf-Blind Services Project
MSU/NDCD
500 University Ave. West
Minot, ND 58707
(701) 858-3580 or 1-800-233-1737



The enclosed video resource list has been provided for your use and is a product of the North Dakota Deaf Blind Services Project (NDDBSP).

All videos are available FREE of charge and the topics represented are ideal to meet in-service, pre-service, paraprofessional and parent group needs. To access, just complete a resource request or call (701) 858-3035.

Please feel free to access the videos and share the listing!

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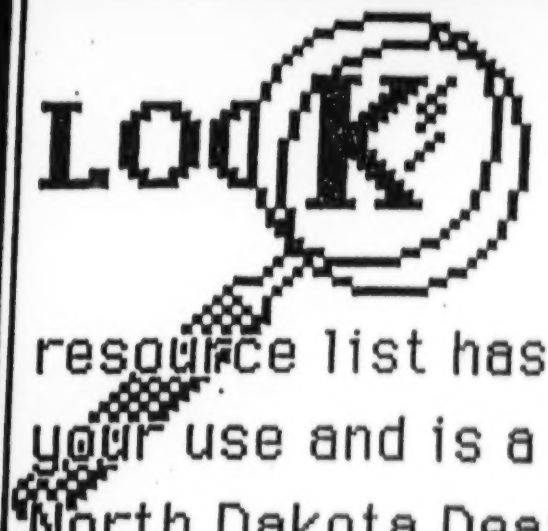

The enclosed *text* resource list has been provided for your use and is a product of the North Dakota Deaf-Blind *Services Project* (NDDBSP)

All videos are available FREE of charge and the topics represented are ideal to meet in-service, pre-service, paraprofessional and parent group needs. To access, just complete a resource request or call (701) 858-3033

Please, feel free to access the videos and share the listing!